

# FINANCIAL DISCLOSURE REPORT

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#### FILER INFORMATION

Name: Benjamin Hernandez
Status: Congressional Candidate

**State/District:** TX09

# FILING INFORMATION

**Filing Type:** Candidate Report

Filing Year: 2018

**Filing Date:** 06/15/2018

# SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
City of Houston Pension [PE]  Description: This is my pension for the second se	he City of H	Undetermined  Houston.	None		
USAA Bank [BA]  Description: Personal Bank Account.	JT	\$1,001 - \$15,000	None		
Wells Fargo Bank [BA]  Description: Personal Bank Account.		\$1,001 - \$15,000	None		

<sup>\*</sup> For the complete list of asset type abbreviations, please visit  $\underline{\text{https://fd.house.gov/reference/asset-type-codes.aspx}}.$ 

# SCHEDULE C: EARNED INCOME

Source	Туре	Amount Current Year to Filing	Amount Preceding Year
City of Houston	Annual Salary (Self)	\$123,420.00	\$123,420.00
Kerwen Group	Wages (Spouse)	\$16,509.00	\$16,509.00
SPOT ON PRINT SERVICES DBA ADHERE CREATIVE	Wages (Spouse)	\$1,655.00	\$1,655.00

#### SCHEDULE D: LIABILITIES

Owner Creditor	Date Incurred	Туре	Amount of Liability
Chase	June 2018	Revolving Account	\$15,001 - \$50,000
Discover Card	June 2018	Revolving Account	\$10,000 - \$15,000

#### SCHEDULE E: POSITIONS

Position	Name of Organization	
Treasurer (unpaid)	American Public Health Association	
Director (unpaid)	American Public Health Association	
Director (unpaid)	The Beacon	
Chief Financial Officer	Houston Health Department	
Director (unpaid)	Association for the Advancement of Mexican Americans	

# SCHEDULE F: AGREEMENTS

None disclosed.

# SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

# EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

**Trusts**: Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

© Yes © No

**Exemption**: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

∇es No

#### **CERTIFICATION AND SIGNATURE**

I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Benjamin Hernandez, 06/15/2018